BEST AVAILABLE COPY

PTO/SB/17 (12-04)(2)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). # FEE TRANSMITTAL # for FY 2005 ☐ Applicant claims small entity status. See 37 CFR 1.27		**Complete if Known**	
		Application Number	10/032,507
		Filing Date	January 2, 2002
		First Named Inventor	Benveniste
		Examiner Name	Not Yet Assigned
TOTAL AMOUNT OF PAYMENT	2200	Art Unit	Not Yet Assigned
		Attorney Docket No.	2000-0611 CIP

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) :

☒ Deposit Account   Deposit Account Number: 20-0782   Deposit Account Name: Moser, Patterson & Sheridan, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below   ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s)   ☒ Credit any overpayments
Under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	**Fee ($)**	**Fee ($)**	**Fee ($)**	**Fee ($)**	**Fee ($)**	**Fee ($)**	**Fees Paid ($)**
Utility	300	150	500	250	200	100	____
Design	200	100	100	50	130	65	____
Plant	200	100	300	150	160	80	____
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0		

2. EXCESS CLAIM FEES

						Small Entity
Fee Description					**Fee ($)**	**Fee ($)**
Each claim over 20 (including Reissues)					50	25
Each independent claim over 3 (including Reissues)					200	100
Multiple dependent claims					360	180

Total Claims	Extra Claims	Fee ($)		Fee Paid ($)		Multiple Dependent Claims	
-20 or HP=	0	x ____	=	0		Fee ($)	Fee Paid ($)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee ($)		Fee Paid ($)
20 - 9 or HP=	11	x 200	=	2200

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee ($)	Fee Paid ($)
____ - 100 = ____	/ 50 =	____ (round up to a whole number) x	=	____

4. OTHER FEE(S)

	Fees Paid ($)
Non-English Specification, $130 fee (no small entity discount)	____
Other (e.g., late filing surcharge) :	____

SUBMITTED BY

Signature	[signature]	Registration No. (Attorney/Agent)	39,400	Telephone	(732) 530-0404
Name (Print/Type)	Kin-Wah Tong, Esq.			Date	March 15, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

04/20/2005 KVESTA 00000000 200782 10032507
01 FC:1201 $200.00 DA